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Title of Invention	PROCESS FOR THE SYNTHESIS OF BIARYL OXAZOLIDINONES						
	. wnamed inventor(s), l/we declare that: ration is directed to:						
i i iio dociai	iction is directed to.						
	☐ The attached application, or						
	Application No. PCT/US2004/024339 filed on July 28, 2004						
	As amended on 01/27/06 (10/566150) (if applicable);						
I/we believe sought;	e that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a pate	ant :					
	reviewed and understand the contents of the above-identified application, including the claims, as amended by	y an					

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all Information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the

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FULL NAME OF INVENTOR(S)	
Inventor one: Yusheng Wu	Date:
Signature: The Vin	Citizen of: CN
	111/00
Inventor two: Shill Chen	Date: (( / / ) / ( )
Signature: She the	Cittzen of:
Additional inventors or a legal representative are being named on	woadditional form(s) attached hereto.

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[ADDITIONAL INVENTORIES]

DECLARATION		Supplemen	ntal S	heet	Pag	e 2 of 3	
Name of Additional Joint Inventor, if any:			A pelition has been filed for this unsigned inventor				
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City	State			Zlp	Coun	try	
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Inventor's Long Licy Ran					Date	11/19/08	
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Cheshire	CT			08410	us	de.	

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3					
Name of Additional Joint Inventor, if an	v:	A pet	ition has been filed	f for this unsigne	d inventor	
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inventor's Signature AP Sho	u	Date			11/18/08	
Newsrk Residence: City	DE State	us Country		us Citiz	us Citizenshio	
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Newark City	DE State		19702-4824 Zip	US	ntry	
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Inventor's Signature Date						
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Mailing Address	,					
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Given Name (first and middle (if any)) Family Name or Sun				ame or Sumame		
Inventor's Signature Date						
Residence: City	State		Country		Citizenship	
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Title of Invention	PROCESS	FOR	THE SYNTHESIS OF BIARYL OXAZOLIDI	NONES
As the belo	w named invent	or(s), it	we declare that:	
This declar	ation is directed	to:		
		The at	tached application, or	
	2	Applic	ation No. PCT/US2004/024339 filed on July 28, 2004	
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l/we believe sought;	that I/we am/a	re the c	riginal and first inventor(s) of the subject matter which is	claimed and for which a patent is
	eviewed and un t specifically refe		d the contents of the above-identified application, including above;	g the claims, as amended by any

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FULL NAME OF INVENTOR(S)	
Inventor one: Yusheng Wu	Date:
Signature:	Citizen of: CN
Inventor two: Shill Chen	Date:
Signature:	Citizen of: CN
[7] Additional inventors or a legal representative are being named on	IWO additional form(s) attached hereto

This collection of Information is required by 35 U.S.C. 115 and 37 CFR 1.83. The information is required to obtain or retain a benefit by this public which is to file rand by the UPFO to processing an exploration. Confidencially in governoid by 80 U.S.C. 122 and 37 CFR 1.11 and 1.4. This collection is estimated to tax 1 cares. Any comment on the smortal of their your required to confidencial to the smortal of their your required to complete the film and/or exploration for required to complete the film and/or exploration for required to complete the film and/or exploration for required to individually such and/or the sent and Trademand Office. U.S. Department of Commerce, P.O. Sent 1640, Association, V.A. 22313-1450. D. OND SEND FEES OR COMPLETED FORMS TO TIES ADDRESS. SEND TO Commissioner for Partners, P.O. Box 1640, Association, V.A. 22313-1450. D. OND SEND FEES OR COMPLETED FORMS TO TIES ADDRESS. SEND TO Commissioner for Partners, P.O. Box 1640, Association, V.A. 22313-1450. D. OND SEND FEES OR COMPLETED FORMS TO TIES ADDRESS. SEND TO Commissioner for Partners, P.O. Box 1640, Association, V.A. 22313-1450. D. OND SEND FEES OR COMPLETED FORMS TO TIES ADDRESS. SEND TO Commissioner for Partners, P.O. Box 1640, Association, V.A. 22313-1450. D. OND SEND FEES OR COMPLETED FORMS TO TIES ADDRESS. SEND TO Commissioner for Partners, P.O. Box 1640, Association, V.A. 22313-1450. D. OND SEND FEES OR COMPLETED FORMS TO TIES ADDRESS. SEND TO Commissioner for Partners, P.O. Box 1640, Association, V.A. 22313-1450. D. OND SEND FEES OR COMPLETED FORMS TO TIES ADDRESS SEND TO Commissioner for Partners, P.O. Box 1640, Association, V.A. 22313-1450. D. OND SEND FEES OR COMPLETED FORMS TO TIES ADDRESS SEND TO Commissioner for Partners To Ties Address If you need assistance in completing the form, call 1-800-PTC-9199 and select option 2.

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DECLARAT		ADDITIONAL INVENTOR(S) Supplemental Sheet  Page 2 of 3						
Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor					
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